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USO Tour Brings Duck Dynasty and Adam LaRoche to Bethesda

By Mass Communication Specialist 2nd Class
Brandon Williams-Church
NSAB Public Affairs staff writer

June 17 was a special day for a select few onboard Naval Support Activity Bethesda.

Members of the Duck Dynasty television show, along with Washington Nationals baseball player Adam LaRoche, visited staff members and wounded warriors at the USO Warrior and Family Center, spending time chatting and taking pictures with their guests.

Duck Dynasty stars Willie Robertson and wife Korie and Jep Robertson and wife Jessica showed compassion and vigor in listening to stories and engaging in personal conversations.

"I've always appreciated the men and women that help defend our rights," said Willie. "Without them there is no [television] show and we can't live our lifestyle."

Korie echoed similar sentiments.

"We are so excited to be here and meet everybody. We support the military and pray for [them] all the time. We're excited to see everybody's spirit and positivity. We love our country and are happy to spread love to the troops."

For Willie and Korie, who have family members who served in the military, coming to the USO to share some quality time with the guests was more than just a simple meet and greet but rather an opportunity to hear from the people who stepped on the frontlines themselves.

"My uncle Si was in the Army for 24 and a half years, so I have a deep appreciation [for the military] and what they do for us," said Willie.



Photos by Mass Communication Specialist 2nd Class Brandon Williams-Church

Duck Dynasaty star Willie Robertson (middle) poses for a picture with Army Sgt. Corey Collins and his wife Katie at the USO Warrior and Family Center June 17.

"It's fun with the platform that we have now to go around and put smiles on some faces. We just love giving back."

Korie said both of her grandfathers served in the military and from a young age instilled in her a heavy respect for the service members and what they do for the country. "They would be very proud that we do this for the [troops]," she said.

LaRoche spent his time mingling with the guests, discussing baseball and petting the service dog that was in attendance. To the surprise of Army Sgt. Corey Collins, as LaRoche was leaving, he took off his special edition Independence Day jersey, autographed

it, and handed it to Collins.

"It was really cool to meet him," said Collins. "He was down to earth and I even talked the man out of his jersey and he signed it! I said, 'what do I have to do to get your jersey?' He said, 'actually I can't give it away because I've been giving out too many jerseys, I'll get in trouble,' but before he left, he pulled it off, signed it and then gave it to me."

Army Sgt. Jodie Gomez said meeting the crew from Duck Dynasty and Adam LaRoche was a great time.

"Meeting everybody was awesome," said Gomez. "I was

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Navy Master-at-Arms 1st Class Raymond Herrera (left) take a picture with Washington Nationals baseball player Adam LaRoche outside of the USO Warrior and Family Center.

Commandant's Corner



I want to begin this edition of Commandant's Corner to congratulate those who were recognized this week by the Secretary of the Navy at an awards ceremony for distinguishing themselves in actions during and in response to the tragic shooting at the Navy Yard on Sept. 16, 2013. I would also like to reassure everyone that the awards presented this week represent a relatively small number of the people who will ultimately be recognized. In the first ceremony, those receiving the highest level of award were recognized, along with external organizations that made great contributions to the recovery process. The common factor among the awards presented in the first ceremony was actual contact with the shooter. The fact that we have a great many awardees who remain to be recognized by either me or the appropriate commanding officer should not be thought to diminish the value of the achievement or respect that should be afforded to the recipient. The remaining awards will be presented at a ceremony that will be scheduled very soon.

I want to let you know about a new program that will be a tremendous benefit to civilian employees. The Department of the Navy (DON) has partnered with the Department of Health and Human Services Federal Occupational Health (FOH) to implement the new DON Civilian Employee Assistance Program (DONCEAP).

DONCEAP now provides a free centralized resource for more than 200,000 civilian employees and family members to access a variety of work and life programs. These services include access to in-person counselors, incident and crisis response management, work/life specialists and general consultants. Employees may receive support from counselors on issues such as legal and financial concerns, relationships, substance abuse, family concerns or any matter that may affect their work. Going far beyond counseling, the work and life specialists can provide em-

ployees and family members with information and resource referrals to child and elderly care, adoption services, credit and debt tips, prenatal care and other services.

It is really designed to help you maintain a balance between what you do here at Naval District Washington (NDW) as part of your normal job responsibilities and those issues in your personal life

that impact your sense of well-being. I want to help each and every one of you to be at your best.

For more information on DONCEAP, visit the website or call 1-844-DONCEAP, or email the DON Human Resources FAQ at DONhrfaq@navy.mil. Visitors will be asked to identify their command and what service they would like. This information does not identify the actual visitor, only the command for regionalized referrals.

While we are discussing families, we just kicked off the annual "Feds Feed Families" food drive. This annual food drive is one of the largest annual charitable campaigns in the nation with federal employees donating food in the summer months when need is at its highest for children out of school not receiving subsidized meals. One single can, box or bag of food means kids this summer will still receive breakfast, lunch and dinner! I encourage you to seek out the donation boxes at your installations and contribute to this very worthwhile cause.

Finally, on Monday, June 30 the Washington Navy Yard Coalition of Sailors Against Destructive Decisions chapter and NDW/Naval Support Activity Washington diversity committee will stage a pride walk in recognition of June as LGBT Pride Month beginning at Willard Park and concluding with a "burger burn" back at the park. I hope to see you there.

Thanks you, stay safe and keep charging!
Rear Adm. Markham K. Rich
Commandant,
Naval District Washington

Bethesda Notebook

Stages of Healing

Stages of Healing at Walter Reed Bethesda will host the following events:

- today at noon in Clark Auditorium, the musical "Soul on Fire."
- today at 5 p.m. in Memorial Auditorium, a singer workshop.
- tomorrow at noon in the America Building, 4th floor (CAPS), musical theater writing workshop.
- tomorrow at 6 p.m. in the Memorial Auditorium, "Soul on Fire."
- Monday at noon in the America Building lobby, singer and pianist Brendan James
- Monday at 2:15 p.m. in the America Building lobby, the Cuesta College.

For more information about Stages of Healing events, contact Lt. Cmdr. Micah Sickel at 301-295-2492.

Leadership Forum, Town Hall

Walter Reed Bethesda Leadership Forum will be Tuesday at 3:30 p.m. in the Memorial Auditorium. The medical center's town halls will be July 8 at 7 a.m., noon and 3:30 p.m. in the Memorial Auditorium. All Walter Reed Bethesda staff members are encouraged to attend at least one of the town hall meetings.

TeamSTEPPS Training

TeamSTEPPS (Team Strategies and Tools to Enhance Performance and Patient Safety) will conduct a four-hour fundamentals course July 14. There will also be a two-day train the trainer course for TeamSTEPPS July 30 to 31. TeamSTEPPS is designed to improve patient outcomes by improving communication and teamwork skills. Continuing education units are possible through Duke University. For registration, times and location, contact Hospital Education and Training, Navy Lt. Asia Raheem at Asia.O.Raheem@health.mil or call 301-400-2822, or Army Sgt. Derek Awantoh at Derek.Awantoh.mil@health.mil or call 301-400-0707.

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'Acts of Selflessness, Bravery, and True Heroism'

Walter Reed Bethesda Physician Honored for Response to Navy Yard Shooting

By Bernard S. Little
WRNMMC Public Affairs
staff writer

"It was a simple twist of fate, and luck, that Lt. Cmdr. Michael Melia happened to be nearby the Washington Navy Yard at the time of the shooting on Sept. 16, 2013," said retired Col. (Dr.) Edward B. Lucci, chief of the Department of Emergency Medicine at Walter Reed National Military Medical Center (WRNMMC).

Lucci, Melia's clinical supervisor at WRNMMC, explained the lieutenant commander, an emergency physician, was heading to Bolling Air Force Base in Southeast Washington, D.C., that morning when he received word of the shooting at the Navy Yard, also in the District's southeast section.

While Melia is assigned to WRNMMC and works clinically in its emergency department, he also teaches emergency medicine at his alma mater, the Uniformed Services University of the Health Sciences (USU), and works emergency medical services (EMS) issues for the Naval District Washington and National Capital Region.

On the morning of Sept. 16 of last year while heading to Bolling, Melia received a phone call from Navy EMS informing him of the shooting at the Washington Navy Yard. "[He] asked a Metropolitan Police Department officer for an escort out of traffic to the Navy Yard," Lucci explained. "He managed to get onto the base and join the first assault team as their primary medical support. He carries his own tactical gear in his car, and the tactical team only allowed him to join [them] because they recognized his name."

Melia carries and maintains tactical gear and a medical trauma bag in his vehicle because he is the regional EMS medical director and teaches tactical emergency medical services (TEMS) to multiple federal and state law enforcement entities.

"[He] wasn't just a doctor showing up at a shooting and saying, 'Hi, I'm a doctor and I'm here to help,'" Lucci added. "He is a very uniquely trained individual, schooled to operate seamlessly in the tactical EMS environment, and he did so brilliantly."

On the scene of the shooting, Melia coordinated with other first responders to establish a casualty collection point. In ad-



Photos by Bernard S. Little

Navy Lt. Cmdr. (Dr.) Michael Melia is honored by the Navy, Monday for his actions during the shooting at the Washington Navy Yard on Sept. 16, 2013.

dition, he joined an assault team as they entered an unsecured area, where he helped evacuate and provide care to casualties.

"He helped rescue many, many office workers who were terrified and sheltering in place," Lucci stated. "At great personal sacrifice, he entered a very dangerous situation; his actions were nothing short of heroic," Lucci added.

For his heroism, Melia was awarded the Navy and Marine Corps Medal by Secretary of the Navy Ray Mabus (SECNAV) and Chief of Naval Operations (CNO) Adm. Jonathan Greenert during a ceremony Monday at the Washington Navy Yard. The decoration is one of the highest non-combat decorations for heroism the U.S. Department of the Navy awards to Sailors and Marines.

For his part, the low-key Melia said, "I just wished that I could have done more that day. I'm humbled and I appreciate everything that the Navy has done." The Navy physician explained his prior training with the Marine Corps as a tactical medical operator was instrumental in his unwavering response during that tragic day.

The citation accompanying



Secretary of the Navy Ray Mabus congratulates Lt. Cmdr. (Dr.) Michael Melia after the emergency physician from Walter Reed Bethesda was awarded the Navy and Marine Corps Medal on Monday for his heroic efforts during the mass shooting at the Washington Navy Yard.

his award states Melia "distinguished himself through acts of selflessness, bravery and true heroism during the shootings and mass murders. Despite an obvious and immediate risk to his own life, [he] assisted Naval Criminal Investigative Service and U.S. Park Police Tactical security forces to locate and neu-

tralize the shooter while providing medical care to wounded casualties in an unsecured area.

"Despite ongoing risks, Lt. Cmdr. Melia made multiple entries into Building 197 in order to carry casualties to a secured location where they could receive medical care," the citation continues. "His swift and

heroic actions, in the face of an immediate risk to his own life, provided an invaluable benefit to both the security forces and the innocent victims affected by these events."

"I believe once he decided he was going to the Navy Yard, there wasn't much that was going to stop him," Lucci said. "He is also very humble. I know he felt like he just did his job and did what anyone would have done that day."

In addition to being a prior enlisted Marine, Melia, a graduate of USU, is married to Lt. Cmdr. Shannon Marchegiani, also a physician at WRNMMC and USU graduate. She attended Monday's solemn ceremony along with other members of Melia's family.

While remembering the victims and saluting the responders during ceremony, Greenert said the heroes of that September day provided "a bright light on a very tough day."

"We're a Navy of Sailors, civilians and families," the admiral said. "We're all shipmates. Last September, tragedy struck. Shipmates demonstrated courage. They are heroes among us today, and heroes who passed that day for sure. Since that day, you have all embodied resiliency [and] the determination to continue [on]. I'm proud of you."

Mabus added, "The memory of those killed that day will always burn bright." He said although the wounds of that day, those seen and unseen, will last, "our men and women in uniform and our civilians, work together, serve together [and] overcome together. We honor the men and women we lost, those who gave their lives for their country. We also honor the law enforcement officers [and] first responders who ran into danger to aid and protect others. We honor the colleagues, friends and strangers who assisted each other away from peril and comforted one another."

In addition to Melia, seven other Sailors received the Navy and Marine Corps Medal. SECNAV also presented the 12 fallen civilians posthumously with the Distinguished Civilian Service Medal for Valor, and awarded the same honor to 16 survivors and first responders. He also presented the Navy's Merit for Group Achievement Award to 11 organizations that responded to the tragedy and assisted its victims.

Junior Officers Welcome Vets, Tour Museum

By Julie Smith
NSAB Public Affairs
staff writer

Professional development day for a group of Naval Support Activity Bethesda (NSAB) Army and Navy junior officers, cadets and midshipmen began June 17 with an early morning van ride to Washington D.C.'s Reagan National Airport.

They were there to welcome an Honor Flight arriving with 90 World War II, Korean War and Vietnam War veterans coming to the region for the day to tour their respective war memorials.

The Honor Flight Network operates through donations and sponsorships to transport America's veterans to Washington, D.C., to visit memorials dedicated to past U.S. military conflicts and the service members who fought in them. Volunteers greet the Honor Flights at local airports,



Navy Lt. Koa Thomas (front) and Junior Officer Council President Army 1st Lt. Regine Faucher (back) light candles June 17 at the United States Holocaust Memorial Museum.

showing appreciation for the veterans as they enter the terminal from the airplane. Honor Flights are conducted at no cost to veterans.

NSAB Junior Officer Council President 1st Lt. Regine Faucher said the goal for the professional development day was to show respect to veterans who have paved the way for today's service members and make a connection to the past.

tion to the past.

"It's just so fun. It brings the past to the present. The veterans are so happy, they cry," Faucher said. "It's a really rewarding experience. You'd hope someone would do the same for you."

As each veteran departed the Honor Flight, cheers and applause erupted throughout the terminal with NSAB service members forming a



Photos by Julie Smith

NSAB Junior Officer Council members welcome World War II and Korean War vet Bruce Blietz at Reagan National Airport June 17 as he departs an Honor Flight.

passageway for the veterans to walk through, while others were transported in wheelchairs. Other volunteers waved small American flags. The U.S. Army Brass

Quintet from Fort Myer, Va., played patriotic music as the veterans moved through the airport.

World War II and Korean War veteran Bruce Blietz arrived on the Honor

Flight from Wisconsin to see the National World War II Memorial and the Korean War Veterans Memorial. He said he was

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Photo Story by Mass Communication Specialist 2nd Class Ashante Hammons

Staff members and wounded warriors get treated to a barbecue lunch provided by the Montgomery Inn from Ohio June 19.

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Symposium Focuses on Ethical Challenges in Medicine

By Bernard S. Little
WRNMMC Public Affairs
staff writer

Should health care be provided preferentially? Who should decide which medicine or research is good to use or consider, and how should those decisions be made? Do the benefits of newborn screening outweigh the sacrifices? What are the ethical challenges in palliative medicine? How does war impact the delivery of health care and what are the ethics involved in military medicine?

These issues, among others, were discussed by nearly 300 attendees at the two-day Third Annual Healthcare Ethics Symposium (AHES) hosted by Walter Reed National Military Medical Center (WRNMMC) June 4 to 5.

Focusing on an array of topics related to this year's symposium theme, "Ethical Challenges in Medicine," presenters included military and civilian physicians, psychiatrists, chaplains, bioethicists and other health care providers and specialists from WRNMMC, Uniformed Services University of the Health Sciences (USU), Georgetown University (GU), East Carolina University (ECU), MedStar Washington Hospital Center (WHC), and the Food and Drug Administration (FDA).

In addition to WRNMMC staff members, other attendees at the symposium included those from the U.S. Customs and Border Protection, Department of Veterans Affairs (VA), Virginia Military Institute, Defense Health Agency, U.S. Department of State, U.S. Department of Homeland Security, Pentagon, National Institutes of Health (NIH) and U.S. Navy Bureau of Medicine and Surgery.

Army Chaplain (Maj.) Stephen Pratel Sr., a bioethicist in the Department of Pastoral Care at WRNMMC, one of the lead organizers for the event, explained the symposium is part of a "long-standing tradition of ethical reflection and instruction" started by the former Walter Reed Army Medical Center (WRAMC) and former National Naval Medical Center (NNMC) before they integrated to form WRNMMC in the fall of 2011. The symposium has continued since the integration.



Photo by Bernard S. Little

From left, retired Army Col. (Dr.) Michael Roy, retired Army Col. (Dr.) Brian Cuneo and Army Lt. Col. (Dr.) Ramey Wilson discuss the ethical challenges in military medicine during the second day of the two-day Third Annual Healthcare Ethics Symposium at Walter Reed Bethesda June 5.

"For over 23 years, the Walter Reed Bethesda Ethics Committee and Department of Pastoral Care have brought world-class ethics education and training to the military medical community," Pratel said.

Dr. Kevin FitzGerald, a research associate professor in the Division of Biochemistry and Pharmacology of the Department of Oncology and the Dr. David P. Lauer Chair for Catholic Health Care Ethics at Georgetown, began the presentations with a discussion of ethics and genetic medicine. A Jesuit priest, FitzGerald has investigated abnormal gene regulation in cancer and ethical issues in human genetics, including the ethical and social ramifications of molecular genetics research.

In providing ethical reflections on genetic medicine, FitzGerald said, "We need to understand better what we mean when we talk about using genomics and genetics to 'type' people and 'bring them back to health' because around

the world people are different. We are not going to have the same health for everybody," he added. "We have different susceptibility to different diseases, and a treatment which is good for one person may not be good for another person."

FitzGerald also discussed the ethical issues involved in patient consent and privacy in genomics and genetics research protocol. "If I find out something about you, I'm going to know something about your siblings, and your parents, and your nieces and nephews, and your grandkids, and pretty much your whole family, so can I just ask you for your consent?" That is an ethical dilemma in genetic research, he explained.

Following FitzGerald, retired Navy Cmdr. (Dr.) Jason Higginson spoke about the promise and peril of newborn screening (NBS), discussing the legal and ethical concerns arising from NBS programs. He explained while all states require newborn screening for every infant, the number of

conditions on a state's screening panel varies from state to state. Each state's public health department decides both the number and types of conditions on its panel.

The director of neonatology and medical director of the ECU Neonatal Intensive Care Unit, Higginson posed the question, "Should parental consent be a requirement for newborn screening?" In some states, parents can only refuse to have their child screened if the screening conflicts with a parent's religious tenets or practices.

He added while newborn screening is beneficial to ensure babies are tested for certain serious conditions at birth to allow treatment early, screening for research and storage can raise ethical concerns. Higginson also posed the question if it is ethical or not for parents to base the fate of their newborns on the results of screening.

Another neonatologist, Lt. Cmdr. (Dr.) Theo Stokes, followed Higginson's presenta-

tion and discussed the challenge of communication in patient care.

The associate program director for the National Capital Consortium Pediatrics Residency and an assistant professor in the Department of Pediatrics at USU, Stokes explained communication training for many clinicians is inadequate resulting in lack of empathy for patients and their families in challenging situations. He shared two quotes from patients to emphasize this point.

One patient stated, "... you want to say 'help me' [but the clinicians] just come, give information and leave."

The other patient stated, "We don't expect the physician to make the decision for us, but we need to feel that, well, that the physician...treats us more humanely...not like a client."

Stokes explained "empathy demonstrates care and builds trust." He added patients feel

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75-Year-Old Soldiers Hangs Up Uniform

By Sharon Renee Taylor
WRNMMC Public Affairs
staff writer

Wearing his dress blue Army uniform, a Bronze Star hung from a burgundy ribbon around Col. (Dr.) Michael H. Mitchell's neck. An assortment of ribbons and medals covered the chest of his uniform — the Combat Medical Badge, the Legion of Merit and the Order of Military Medical Merit.

The 75-year-old colonel, retiring after 38 years in the Army, tried to count how many times he has seen his uniform change: five times roughly, depending on how you put them together, he guessed.

"My favorite practice uniform for day-to-day was the khakis. I wish we would go back to that," Mitchell said, as a smile emerged.

Life in the Army has been excellent, according to the physician, who for nearly four decades in uniform, treated children and adults with epilepsy, headaches or brain tumors, as well as congenital or learning disorders before his retirement in April. He recalled what he'll



Photo by Sharon Renee Taylor

After nearly 40 years in uniform, Army Col. (Dr.) Michael H. Mitchell recently retired. Scheduled to retire in 2006, Mitchell was recalled to active duty until his retirement last month at Walter Reed Bethesda.

remember most as a military physician.

"Many, many patients, some of whom I took care of for over 30 years, and the people I trained, including the current [pediatric neurology] program

director, I've trained 30 child neurologists. And the many other staff I interacted with — I value their friendship," Mitchell said.

Were they surprised that he was still in uniform?

"Oh yes, many," he answered. "Many of my fellows have retired ... I'm working with people who are on staff here as retirees that I knew as interns and medical students," he said.

Mitchell joined the faculty of Uniformed Service University of Health Sciences (USU) in 1979, a year after the school first opened. He will continue to serve as professor in neurology and pediatrics at the university. He added he has had a hand in training virtually all pediatric neurologists in uniform since 1983 — Army, Navy, Air Force and Public Health Service. "Almost all of them," he continued. "It's a long legacy. 'It's one I'm really happy about.'"

His career in pediatric neurology has been fulfilling, he explained. "Trying to help kids with neurological problems, when you're successful, it's very rewarding," he said.

Early on, Mitchell looked to

a career in medicine. "I had hoped to be a doctor, since about 12 years old — that's what I wanted to do," he said.

Born to a nurse and an Army test pilot in California, Mitchell's father, Maj. Hewitt F. Mitchell, was killed during World War II in 1943. "He had said many times that had he had the opportunity he would've been a physician, and I think that was influential," the doctor said of his father.

Mitchell completed his undergraduate and medical school education at Stanford University, married his wife (the now retired Army Lt. Col. Madeline Mitchell) two weeks before he left for Vietnam when he was drafted to serve as a battalion surgeon, and earned the Bronze Star and Combat Medical Badge. Staying in the military for a few more years at the Field Service School of Epidemiology, he also served as an instructor before returning to civilian life for nearly 10 years.

Mitchell then returned to active duty and served at the former Letterman Medical Center in California, while his wife attended medical school before

she joined the Army as a pathologist. In February 1983, he pinned on the rank of colonel.

Eventually, he moved the family, which now included son Gregory and daughter Elisabeth, to Potomac, Md. Among his many positions, Mitchell was chief of pediatrics and worked as a neurology consultant at the former Walter Reed Army Medical Center (WRAMC).

Due to retire in 2006, Mitchell was recalled to active duty and continued to serve at WRAMC, then moved to Walter Reed Bethesda when WRAMC integrated with the former National Naval Medical Center (NNMC) in the fall of 2011 to form Walter Reed National Military Medical Center (WRNMMC) Bethesda.

He explained, as a retiree recall with more than 30 years of service, he did not have to take the Army's physical training (PT) test, did not get an Officer Evaluation Report and was not promotable. "Three things that were just perfect for me," he laughed.

But the septuagenarian in-

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'Aiming High'

Wounded Warrior First to Complete EMT Training at WRB



Courtesy photo

By Sarah Marshall
WRNMMC Public Affairs
staff writer

While deployed to Afghanistan, Army Sgt. Chris Hemwall worked alongside medics who taught him basic life support techniques and even provided him a tourniquet, which he would use to save his own life during an ambush in March 2011.

The deployment also helped spark Hemwall's interest in earning an emergency medical technician (EMT) certification that he received this month from the EMT training course at Walter Reed National Military Medical Center (WRNMMC), making him the first wounded warrior to complete the course at the nation's medical center.

The Army cavalry scout lost his right leg after the ambush

in Afghanistan and has been in treatment at WRNMMC for roughly three years. The Soldier said he is pleased to be the first wounded warrior to complete the course at WRNMMC, but couldn't have done it without support from his leadership and his wife, Valerie.

"All of my squad leaders stepped in one way or another," Hemwall said. "I have an amazing support group."

The training, May 5 through June 5, followed national guidelines and included 125 hours of course work and hands-on instruction, Hemwall said, such as basic lifesaving skills, first aid and CPR (cardiopulmonary resuscitation). It was challenging, as it covered material from several book chapters each day and required participants to take, and pass, multiple tests throughout the month, he added.

At the end of the course, par-

ticipants had to pass a final exam, and those who did not pass had to retake the entire training, Hemwall explained. Those who passed, including Hemwall, were eligible to take the National Registry of Emergency Medical Technicians (NREMT) exam to receive national EMT certification. On June 16, the wounded warrior took and passed the NREMT exam on the first try. According to the NREMT website, of those who took the exam last year in Maryland, less than 70 percent passed on their first try.

Prior to earning his certification, Hemwall explained his leadership ensured he was medically clear to participate, and that he was still able to make his appointments. Now in the process of medically retiring from the military, he plans to start an internship with the Fire Department onboard Naval Support Activity Bethesda

this summer. He also hopes to volunteer as an EMT for Montgomery County.

Hemwall said he has always looked up to his father, a firefighter, and hopes to go into either firefighting or law enforcement when he is out of the military so he can continue to serve.

"I want to serve my community and serve their families, keep their families safe while they're gone, [and] give them peace of mind," Hemwall said.

With these aspirations, the Soldier said he decided to take advantage of the EMT training offered at WRNMMC. While he is proud of this achievement, he said, overall, he is proud of the people he has come to know in the military, and is proud to say he was able to provide aid to others in combat. While sta-

See **EMT** page 8

Army Sgt. Chris Hemwall with his one-year-old son, Colton. Hemwall recently became the first wounded warrior to complete EMT training at Walter Reed Bethesda.

EMT

Continued from 7

tioned near Kandahar Province, Hemwall was shot three times during an ambush, suffering nerve damage and later losing his right leg. Two of his fellow service members were killed in the attack and three others were wounded, he said.

Billy Mitchell, program director of Emergency and Tactical Medicine at WRNMMC, attests to Hemwall's

determination. An EMT training instructor, Mitchell said Hemwall was motivated and "very cheerful," and "an inspiration to those around him."

"He showed by example that he didn't make any excuses for anything," Mitchell said. "I do believe he will succeed in whatever he does because he has the drive, determination and heart to complete any task."

Hemwall's squad leader, Sgt. Luis Rivera, 2nd Platoon, Battle Company, Warrior Transition Brigade, shared the same sentiment, stating, "Sgt. Hemwall is always trying to find a way to improve in his career for his family ... Sgt. Hemwall is an exceptional Sol-

dier and a role model for any Soldier in transition. You will always see him motivated and trying to push other Soldiers to progress in their recovery."

Not only is he an exceptional Soldier, but a friend, Rivera added.

"[Sgt. Hemwall] will not only take care of other Soldiers, he will do his best to take care of his leadership," he continued. "If you are having a bad day, the person you want to come to see is Sgt. Hemwall. He will do his best to make you laugh and will always offer himself to help."

Rivera also said he believes the wounded warrior will be successful in his future endeavors because he is motivated to overcome any obstacle. He added, "Sgt. Hemwall is a pure example of what an NCO is in the U.S. Army and why NCOs are the backbone of the Army."

Hemwall's greatest accomplishment, though, is being a role model to his fellow service members and especially to his 1-year-old son, Hemwall said.

The Soldier added he enjoys keeping busy. He's also working on earning a SCUBA certification and is submitting his times to the Warrior Games, in hopes of being chosen as an alternate for either the biking or running competitions.

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SOLDIER

Continued from 7

sists he can easily pass the Army PT test, explaining he eats moderately as a "semi-vegetarian" and enjoys hiking, some running and walking the dogs.

Civilian pediatrician and geneticist Dr. Sondra Levin worked with Mitchell at WRAMC and WRNMMC. She called him "a neurologist's neurologist" for his expertise and clinical judgment, and said he will be remembered for "his kindness toward colleagues, his kindness toward patients and families and his wisdom."

"It's just been an incredible privilege the entire time that I've known

you," Army Col. (Dr.) Jamie Grimes told Mitchell at his retirement ceremony on May 14. She assumed his position as chief of neurology. "I was a meager psychiatry resident in 1995," she said, recalling when the two met. "I got to become a neurologist, and I am indebted to you forever."

Army Lt. Col. (Dr.) David Dennison, also a neurologist at WRNMMC, read Mitchell's retirement orders at the ceremony.

"You are officially released from active duty and placed on the retirement list," Dennison read. "The people of the United States express a thanks and gratitude for the faithful service."

Although officially retired, Mitchell said he'll continue to serve at WRNMMC as a Red Cross volunteer until he returns to California.

VETS

Continued from 4

surprised at the acknowledgement the veterans received at the airport.

"It's pretty wild and something you wouldn't anticipate or expect," Blietz said.

According to the Honor Flight Network website, the organization operates about six flights per year carrying veterans to the local area from all across the country. Honor Flight Network gives priority to senior veterans, such as those who served in World War II, or veterans who are terminally ill. The organization will continue to serve veterans from all wars, including the most recent conflicts in Afghanistan and Iraq.

"This is one of the best ways to give back to those who served," Faucher said. "As service members, we can enjoy everything we've been enjoying, like military benefits and recognition, because

of them and just thank them for what they've done."

After welcoming the Honor Flight, the Junior Officer Council continued their professional development day by touring the United States Holocaust Memorial Museum. The museum documents the Nazi party's rise to power, the systematic persecution of the Jews and the ensuing military conflict, World War II.

"We like to show our junior officers what the area has to offer, and it's always good to start with a museum," Faucher said.

Navy midshipman Ron Micklos said a full-size train car exhibit that described how Jews were transported from ghettos to concentration camps really moved him emotionally.

"They fit 100 people in one of those," Micklos said.

The United States Holocaust Memorial Museum is open every day of the year except for Yom Kippur and Christmas Day. Admission to the museum is free.

USO

Continued from 1

trying to get the Duck Dynasty people to take me hunting. "[Every one of them] was down to earth and you could tell they cared about being here. They actually sat down and spent a lot of time talking with us individually. It wasn't just a photo opportunity for them. I give it up to the [people] that take the time out of their own schedules to come and see us because they

don't need to. I have a much better appreciation for them as individuals."

Army Sgt. Adam Mckerrick and Collins had similar feelings about the experience.

"They were very personable," said Mckerrick. "I could probably sit with them for hours and talk about anything with them. It was really nice to see that they interacted with everybody. I would love to get to hang out with them again."

"It was an amazing experience all around and awesome having the USO bring people like that in to boost morale," Collins said.

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MEDICINE

Continued from 6

abandoned when their providers seem untouched by their emotional suffering, and physicians who express their own emotions are perceived as more compassionate and trustworthy.

Empathy also facilitates shared decision-making, Stokes continued. He added empathy can be verbalized using the acronym NURSE — Naming (“it sounds like...”); Understanding (“I’m hearing you say...”); Respecting (“I’m impressed by...”); Supporting (“I’ll be here for you...”); Exploring (“tell me more...”).

He explained empathy helps facilitate better communication in many difficult patient care situations, and also help clinicians determine the values of patients and their families — who will be making the health care decisions with recommendations from their providers.

Dr. Valencia Clay also discussed patients and family making difficult decisions. Clay, who is leading the creation of a palliative care service at WRNMMC, explained palliative medicine uses an interdisciplinary approach to obtain pain and symptom control; address psychosocial and spiritual issues; and assist with complex

medical decision-making, end-of-life discussions and coordination of care.

She added autonomy, a fundamental ethical principle of palliative care, is the basis for informed consent (the process for getting a person’s permission before conducting health care intervention) and advanced directive (a legal document in which a person specifies what actions should be taken for their health if they are no longer able to make decisions for themselves because of illness or incapacity).

“It’s about what do you want as a patient,” she stated.

Dr. James Walter, Austin and Ann O’Malley professor emeritus of bioethics for Loyola Marymount University in Los Angeles, concluded day one of the symposium with a discussion about the ethics of palliative sedation for dying patients in refractory pain.

Day two of the symposium primarily focused on ethics in military medicine, and retired Army Col. Michael Roy began the presentations with a discussion on providers’ roles in war.

Professor of medicine and director of the Division of Military Internal Medicine at USU and director of Recruitment for USU’s Center for Neuroscience and Regenerative Medicine, Roy explained war brings significant ethical challenges for military physicians because of their dual roles as medical professionals and members of

the armed forces. He said these dual roles have the potential to come into conflict. He explained in war, physicians must be mindful of the legal constraints within which they provide care, and that they are obligated to report potential infractions of international or U.S. laws. In addition, clinicians may face situations not covered by existing laws but involve potential medical ethical violations. He added if deployed providers need guidance in morally or ethically ambiguous circumstances, legal authority is hierarchical, beginning with the Geneva Conventions, as well as advice from the unit’s chaplain, since they have training in combat ethics.

“We are really health care providers first,” Roy said. “The final guideline is really [the physician’s own] moral compass and personal integrity.” He said this is why it’s important military medical training programs include ethics education so physicians can understand the challenges they may face and are aware of the ethical and legal principles that should guide their actions.

After his presentation, Roy was joined in a panel discussion by retired Army Col. (Dr.) Brian Cuneo and Army Lt. Col. (Dr.) Ramey Wilson about ethical challenges in military medicine.

Cuneo is a retired Army colonel and currently works in pulmonary and critical care medicine at MedStar Washington Hospital Center. He has delivered medical care in Micronesia, Mongolia and Iraq, in addition to deployments in Honduras, Panama and Kuwait. Wilson is a general internal medicine fellow.

The panelists agreed there are significant ethical challenges for military physicians, especially during war, and recent actions by health care providers in Abu Ghraib and Guantanamo Bay have been broadly scrutinized. They agreed deciding what to report can be difficult, but the physician’s professional integrity and ethics should compel them to report any situation in which a patient is being harmed or medical ethics are compromised.

“I tell my medics that the goal at the end of a deployment is for all of us to come home with honor, proud of our service and knowing we did the best that we could,” Wilson said.

During the final panel discussion, Dr. Edmund Grant Howe, of USU, discussed efforts by members of the American Society for Bioethics and Humanities during the last year; Dr. James J. Walter gave an overview of the Affordable Care Act; Dr. Sara Fay Goldkind of the FDA addressed research ethics; and Pratel spoke of spirituality in health care.

“Issues of spirituality can be like a thorny bush for a lot of people, even for ministers,” Pratel said. “How do you honor a person’s spirituality in the course of your care for them?”

He added medicine and religion has a long, related history with many of the first healers being priests around 3000 B.C.

Pratel said patient-centered care really can’t be provided without honoring a patient’s spirituality. He went on to note a 2011 Gallup poll showed 90 percent of adults in America believe in God or some type of a higher power; people want spiritually sensitive care; and spirituality has been linked to positive health outcomes and poor health outcomes (some believing their illness may be caused by Satan, or that they didn’t pray properly and their illness persists).

“Spirituality is an important part of well-being and health care, and [it] cannot be separated from treatment,” Pratel added. “Spirituality should not dictate medical care, but we also shouldn’t go to the extreme in which medical care limits or dictates a person’s spirituality,” he concluded.

Dr. Joshua Friedlander, who works in the Department of Psychiatry at WRNMMC and attended the symposium, said it was very informative and what he found most interesting was the presentations concerning ethics in war and military medical care.

Among the symposium attendees, Gary Gregory of the VA agreed, adding, “The program is always interesting. You have bright people doing cutting-edge medicine.”

This was a hope for the symposium, explained Army Maj. (Dr.) Robert J. Walter, chair of the Ethics Committee at WRNMMC and director of the National Capital Area Regional Healthcare Ethics Consortium who was also a lead organizer.


“The [symposium] targets ideas and raises awareness on leading ethical issues to [increase] interest in medical ethics as well as competence in recognizing and addressing the issues military medical professionals and providers will encounter. Our hope is the topics provide an opportunity for reflection and discussion, both for who we may apply these ideals within our existing institutions as well as how they might inspire transformative change for our community,” he stated.

Pratel added the Medical Ethics Short Course, providing additional ethical training, will be Oct. 14 to 16. Course curriculum and details will be released in late July.

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